

RECEIVED
CENTRAL FAX CENTER

MAY 23 2006

TRANSMIT (to be used for all correspondence)	on No.	10/715,977
	ate	November 17, 2003
	med Inventor	Thomas M. Rossi
		2821
	ier Name	Tran, Thuy V.
Total Number of Pages in This Submission		14
Attorney Docket Number		42P17125

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">Facsimile Transmittal Sheet</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Brent E. Vecchia, Reg. No. 48,011 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>Brent E. Vecchia</i>
Date	May 22, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Brent E. Vecchia	Date	May 22, 2006
Signature	<i>Brent E. Vecchia</i>	Date	May 22, 2006

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 11/30/2005.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22312-1450

RECEIVED
CENTRAL FAX CENTER

MAY 23 2006

**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

(\$)

Complete if Known

Application Number	10/715,977
Filing Date	November 17, 2003
First Named Inventor	Thomas M. Rossi
Examiner Name	Tran, Thuy V.
Art Unit	2821
Attorney Docket No.	42P17125

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments

under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
20	23	50.00	\$0.00
Independent Claims	3	200.00	\$0.00
Multiple Dependents			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1202	2202	25		Claims in excess of 20
1201	2201	100		Independent claims in excess of 3
1203	2203	180		Multiple Dependent claim, if not paid
1204	2204	295		Reissue independent claims over original patent
1205	2205	150		Reissue claims in excess of 20 and over original patent

SUBTOTAL (1)

(\$) 0.00

*or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1051	2051	65		Surcharge - late filing fee or oath
1052	2052	25		Surcharge - late provisional filing fee or cover sheet
2053	2053	130		Non-English specification
1251	2251	60		Extension for reply within first month
1252	2252	225		Extension for reply within second month
1253	2253	510		Extension for reply within third month
1254	2254	795		Extension for reply within fourth month
1255	2255	1,080		Extension for reply within fifth month
1401	2401	250		Notice of Appeal
1402	2402	250		Filing a brief in support of an appeal
1403	2403	600		Request for oral hearing
1451	2451	1,510		Petition to institute a public use proceeding
1460	2460	130		Petitions to the Commissioner
1807	1807	50		Processing fee under 37 CFR 1.17(a)
1808	1808	180		Submission of Information Disclosure Sheet
1809	1809	395		Filing a submission after final rejection (37 CFR § 1.129(a))
1810	2810	395		For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$) 0.00**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011	Telephone	(303) 740-1980
Signature	<i>Brent E. Vecchia</i>	Date	05/22/06		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/1) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

RECEIVED
CENTRAL FAX CENTER

MAY 23 2006

**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete if Known

Application Number	10/715,977
Filing Date	November 17, 2003
First Named Inventor	Thomas M. Rossi
Examiner Name	Tran, Thuy V.
Art Unit	2821
Attorney Docket No.	42P17125

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments

under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
20	23	0	\$0.00
Independent Claims	3	0	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 360	2203 180	Multiple Dependent claim, if not paid
1204 760	2204 395	**Release independent claims over original patent
1205 300	2205 150	**Release claims in excess of 20 and over original patent

SUBTOTAL (1) (\$)

0.00

*or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1051 130	2051 65	Surcharge - late filing fee or oath
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet
2053 130	2053 130	Non-English specification
1251 120	2251 60	Extension for reply within first month
1252 450	2252 225	Extension for reply within second month
1253 1,020	2253 510	Extension for reply within third month
1254 1,690	2254 795	Extension for reply within fourth month
1255 2,160	2255 1,080	Extension for reply within fifth month
1401 500	2401 250	Notice of Appeal
1402 500	2402 250	Filing a brief in support of an appeal
1403 1,000	2403 500	Request for oral hearing
1451 1,510	2451 1,510	Petition to institute a public use proceeding
1480 130	2480 130	Petitions to the Commissioner
1807 50	1807 50	Processing fee under 37 CFR 1.17(a)
1806 180	1806 180	Submission of Information Disclosure Sheet
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

0.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Brent E. Vecchia	Registration No. (Attorney/Agent)	48,011	Telephone	(303) 740-1980
Signature	<i>Brent E. Vecchia</i>	Date	05/22/06		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (vtr) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

RECEIVED
CENTRAL FAX CENTER

MAY 23 2006

Our Docket No: 42P17125

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Thomas M. Rossi

Examiner: Tran, Thuy V.

Serial No: 10/715,977

Art Unit: 2821

Filed: November 17, 2003

For: System to Improve Display
Efficiency Based on
Recycling Local Heat SourceRESPONSE TO OFFICE ACTIONCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed 02/22/2006, the Applicants respectfully request that the Examiner enter the following amendments and consider the following remarks.

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that I am causing the above-referenced correspondence to be transmitted via facsimile to the United States Postal Service at (571) 273-8300 on the date indicated below:

Date of Transmission

Brent E. Vecchia

Name of Person Transmitting Correspondence

Signature

Date

BEST AVAILABLE COPY